

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

WOMEN LEAD PAC

ADDRESS (number and street)

43 SOUTH NINTH STREET 2ND FLOOR

☐ Check if different than previously reported. (ACC)

INDIANA

PA

15701

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00548545

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☒ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
07 01 2014

through

M M M / D D D / Y Y Y Y Y Y
09 30 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Christine J. Toretti

Signature of Treasurer

Christine J. Toretti

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 15 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

WOMEN LEAD PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
07		01		2014

To:

M M	/	D D	/	Y Y Y Y Y
09		30		2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2014</td></tr></table>	Y	Y	Y	Y	Y	2014						<table><tr><td colspan="5">81050.76</td></tr></table>	81050.76				
Y	Y	Y	Y	Y													
2014																	
81050.76																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">125599.90</td></tr></table>	125599.90															
125599.90																	
(c) Total Receipts (from Line 19)	<table><tr><td colspan="5">96975.00</td></tr></table>	96975.00					<table><tr><td colspan="5">272652.08</td></tr></table>	272652.08									
96975.00																	
272652.08																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">222574.90</td></tr></table>	222574.90					<table><tr><td colspan="5">353702.84</td></tr></table>	353702.84									
222574.90																	
353702.84																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">217045.50</td></tr></table>	217045.50					<table><tr><td colspan="5">348173.44</td></tr></table>	348173.44									
217045.50																	
348173.44																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="5">5529.40</td></tr></table>	5529.40					<table><tr><td colspan="5">5529.40</td></tr></table>	5529.40									
5529.40																	
5529.40																	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">25000.00</td></tr></table>	25000.00															
25000.00																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

WOMEN LEAD PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
07 01 2014

To:

M M / D D / Y Y Y Y Y
09 30 2014
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

71975.00

247527.08

(ii) Unitemized

0.00

125.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

71975.00

247652.08

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

71975.00

247652.08

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

25000.00

25000.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

96975.00

272652.08

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

96975.00

272652.08

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	17045.50	77388.58
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	17045.50	77388.58
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	200000.00	250784.86
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	20000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	20000.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	217045.50	348173.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	217045.50	348173.44

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	71975.00	247652.08
34. Total Contribution Refunds (from Line 28(d))	0.00	20000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	71975.00	227652.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	17045.50	77388.58
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	17045.50	77388.58

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 13

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMEN LEAD PAC

Full Name (Last, First, Middle Initial)

A. Charles Bass

Mailing Address 5400 E. Gleneagles Drive

City State Zip Code
Tucson AZ 85718

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gleaneagles Real Estate LLC

Occupation

Principal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 07 / 2014

Transaction ID : SA11AI.4230

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Jack Biltis

Mailing Address 27582 N. 67th Way

City State Zip Code
Scottsdale AZ 85262

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tag Employer Services

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11AI.4228

Amount of Each Receipt this Period

25000.00

Full Name (Last, First, Middle Initial)

C. Jim Click Jr.

Mailing Address 6403 E. Miramar Dr.

City State Zip Code
Tucson AZ 85715

FEC ID number of contributing
federal political committee.

C

Name of Employer

Jim Click Automotive

Occupation

Auto Dealer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 07 / 2014

Transaction ID : SA11AI.4229

Amount of Each Receipt this Period

25000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 13
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMEN LEAD PAC

Full Name (Last, First, Middle Initial)

A. Palladio, LLC

Mailing Address PO Box 697

City State Zip Code
 Indiana PA 15701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

46500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 25 2014

Transaction ID : SA11AI.4216

Amount of Each Receipt this Period

4500.00

In-kind - Communications Consulting Fees to Waverly Row Consulting, LLC

Full Name (Last, First, Middle Initial)

B. Palladio, LLC

Mailing Address PO Box 697

City State Zip Code
 Indiana PA 15701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

51000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 22 2014

Transaction ID : SA11AI.4218

Amount of Each Receipt this Period

4500.00

In-kind - Communications Consulting Fees to Waverly Row Consulting, LLC

Full Name (Last, First, Middle Initial)

C. Palladio, LLC

Mailing Address PO Box 697

City State Zip Code
 Indiana PA 15701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 26 2014

Transaction ID : SA11AI.4220

Amount of Each Receipt this Period

4500.00

In-kind - Communications Consulting Fees to Waverly Row Consulting, LLC

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

13500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 13

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMEN LEAD PAC

Full Name (Last, First, Middle Initial)

A. Christine J. Toretti

Mailing Address 2428 Oak Drive

City

Indiana

State

PA

Zip Code

15701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Palladio, LLC

Occupation

President

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

10830.08

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2014

Transaction ID : SA11AI.4222

Amount of Each Receipt this Period

2278.00

In-kind - Legal Fees to Clark Hill PLC

Full Name (Last, First, Middle Initial)

B. Christine J. Toretti

Mailing Address 2428 Oak Drive

City

Indiana

State

PA

Zip Code

15701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Palladio, LLC

Occupation

President

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

12027.08

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2014

Transaction ID : SA11AI.4224

Amount of Each Receipt this Period

1197.00

In-kind - Legal Fees to Clark Hill PLC

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3475.00

71975.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 13
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☒ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
WOMEN LEAD PAC

A. Christine J. Toretti Full Name (Last, First, Middle Initial) Mailing Address 2428 Oak Drive City Indiana State PA Zip Code 15701 FEC ID number of contributing federal political committee. C Name of Employer Palladio, LLC Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 37027.08		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 25 / 2014 Transaction ID : SA13.4238 Amount of Each Receipt this Period 25000.00 Loan
B. Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼		Date of Receipt M M / D D / Y Y Y Y Y Y Amount of Each Receipt this Period
C. Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼		Date of Receipt M M / D D / Y Y Y Y Y Y Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)..... ▶		25000.00
TOTAL This Period (last page this line number only)..... ▶		25000.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

WOMEN LEAD PAC

A. Palladio, LLC

Mailing Address PO Box 697

City	State	Zip Code
Indiana	PA	15701

Purpose of Disbursement
In-kind - Communications Consulting Fees to Waverly Row Consulting, LLC

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

Transaction ID : SB21B.4217

Amount of Each Disbursement this Period

4500.00

Full Name (Last, First, Middle Initial)

B. Palladio, LLC

Mailing Address PO Box 697

City	State	Zip Code
Indiana	PA	15701

Purpose of Disbursement
In-kind - Communications Consulting Fees to Waverly Row Consulting, LLC

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.4219

Amount of Each Disbursement this Period

4500.00

Full Name (Last, First, Middle Initial)

C. Palladio, LLC

Mailing Address PO Box 697

City	State	Zip Code
Indiana	PA	15701

Purpose of Disbursement
In-kind - Communications Consulting Fees to Waverly Row Consulting, LLC

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 26 2014

Transaction ID : SB21B.4221

Amount of Each Disbursement this Period

4500.00

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

13500.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

WOMEN LEAD PAC

A. Christine J. Toretti

Mailing Address 2428 Oak Drive

City	State	Zip Code
Indiana	PA	15701

Purpose of Disbursement
In-kind - Legal Fees to Clark Hill PLC

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement



Transaction ID : SB21B.4223

Amount of Each Disbursement this Period

2278.00

Full Name (Last, First, Middle Initial)

B. Christine J. Toretti

Mailing Address 2428 Oak Drive

City	State	Zip Code
Indiana	PA	15701

Purpose of Disbursement
In-kind - Legal Fees to Clark Hill PLC

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State: District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

08 / 28 / 2014

Transaction ID : SB21B.4225

Amount of Each Disbursement this Period

1197.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3475.00

16975.00

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 12 OF 13

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4238

WOMEN LEAD PAC**LOAN SOURCE** Full Name (Last, First, Middle Initial)

Christine J. Toretti

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 2428 Oak Drive

City Indiana

State PA

ZIP Code 15701

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

TERMS

Date Incurred

09

25

2014

Date Due

12/31/2015

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

25000.00

TOTALS This Period (last page in this line only)..... ►

25000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 13 OF 13
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN LEAD PAC			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00548545</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>					
Full Name of Payee Strategic Media Placement Inc.			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">09 / 30 / 2014</div>		
Mailing Address 7669 Stagers Loop			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">200000.00</div>		
City Delaware		State OH	Zip Code 43015		Transaction ID : SE.4213
Purpose of Expenditure Media Buy and Production		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">09 / 30 / 2014</div>	
Name of Federal Candidate RONALD BARBER			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: AZ		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">200000.00</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		
Mailing Address			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		
City		State	Zip Code		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>
Purpose of Expenditure		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>			
Name of Federal Candidate			<input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		
<div style="display: flex; justify-content: space-between;"><div style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures..... ▶</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;">200000.00</div></div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div style="width: 60%;">(b) SUBTOTAL of Unitemized Independent Expenditures ▶</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;"></div></div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div style="width: 60%;">(c) TOTAL Independent Expenditures..... ▶</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;">200000.00</div></div></div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Christine J. Toretti</i>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 / 15 / 2014</div> <div style="text-align: center;">[Electronically Filed]</div>		